## Michigan Manual 2009-2010

## DEPARTMENT OF COMMUNITY HEALTH



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The Michigan Department of Community Health (MDCH) is one of the largest of the executive branch departments. MDCH is responsible for health policy and management of the state's health, mental health, and substance abuse care systems. Services provided by the department include:

**Medical Services Administration (MSA).** MSA's primary responsibility is oversight of Michigan's Medicaid program. Medicaid provides medical assistance for low-income residents who meet certain eligibility criteria. The program pays for a broad range of services, such as inpatient and outpatient hospital care, physician visits, drugs, nursing home care, durable medical equipment, and mental health services.

The current Medicaid caseload is over 1.7 million people—the highest ever for the program. Approximately two-thirds of Medicaid beneficiaries are enrolled in managed care.

Medicaid comprises more than two-thirds of MDCH's budget. More than half of the Medicaid beneficiaries receiving services are children.

MSA also administers the MIChild program—a comprehensive benefits package for the children of Michigan's eligible working families.

**Health Policy and Regulation Administration.** The Health Policy and Regulation Administration is responsible for many components of MDCH's health policy and regulatory responsibilities.

The Bureau of Legal and Policy Affairs oversees primary care and access to care initiatives and also contains the Certificate of Need (CON) program and health policy analysis; MDCH's legal office, whose responsibilities include FOIA and HIPAA activities; and the Crime Victims and EMS Division, which oversees the Crime Victims Services Commission, providing compensation and assistance to crime victims.

The Bureau of Health Professions licenses more than a dozen medical practitioner classifications throughout the state, including doctors, nurses, physician assistants, and psychiatrists, as well as administering the Medical Marihuana program.

The Bureau of Health Systems licenses and provides oversight for hospitals, medical clinics, and nursing homes/facilities, diligently working to protect our most vulnerable citizens dependent on these facilities for their health and care.

**Public Health Administration.** The Public Health Administration is responsible for many aspects of public health policy, including communicable disease surveillance and outbreak investigation; control and prevention of chronic diseases, including cancer, cardiovascular disease, diabetes, and injuries; health statistics compilation and dissemination; HIV/AIDS and sexually transmitted disease prevention and care; and tobacco cessation, immunizations, lead abatement, newborn screenings, and vital records collection and maintenance. The administration also coordinates this work through contracts with 45 local public health departments that serve all the jurisdictions in Michigan.

The Office of Public Health Preparedness (OPHP), the state's frontline response to bioterrorism activity, coordinates the state's bioterrorism response and all hazards emergency planning with the Michigan State Police and State Emergency Operations Center. This office also coordinates emergency planning with all other state agencies.

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The Bureau of Family, Maternal, and Child Health serves Michigan residents with the Women, Infants, and Children (WIC) program, Family and Community Health initiatives, and Children's Special Health Care Services Plan programming.

The Public Health Administration also houses the Bureau of Laboratories, which manages one of the nation's best public health laboratories. It also houses the Office of Health Disparities Reduction/Minority Health.

Office of the Surgeon General. The state's first Surgeon General was appointed by the governor in 2003 to lead Michigan's public health promotion and disease prevention efforts. The Surgeon General continues to advocate for community-based health. In March 2007, the Surgeon General was awarded a \$5 million dollar grant, entitled Generation With Promise (GWP) from the W.K. Kellogg Foundation, to empower middle school students in underserved areas to drive policy, environmental and behavioral change in their schools. In 2008, the goals of GWP expanded to include the Generation With Promise-Family Enhancement Project, which seeks to improve the health of youth and their families by providing nutrition education and promoting physical activity to students and caregivers within the GWP schools. The Surgeon General also directs an initiative (Healthy Kids, Healthy Michigan) awarded through the National Governor's Association. The focus of this effort is to develop a 5-year strategic policy agenda to reduce childhood obesity. In addition, the Surgeon General continues to champion the governor's blueprint for preventing unintended pregnancies through her appointment to the Board of Directors of the National Campaign to Prevent Teen and Unwanted Pregnancy.

Mental Health and Substance Abuse Administration. The public mental health system in Michigan operates under the authority of the Michigan Mental Health Code (MCL 330.1001 et seq.) The Mental Health and Substance Abuse Administration provides services to people who have a mental illness, developmental disability, or substance abuse problem. Under contracts with the Michigan Department of Community Health, the direct delivery of almost all publicly funded mental health services is undertaken through a system of 46 county-based Community Mental Health Services programs (CMHSPs), operating under contracts with the Michigan Department of Community Health. The CMHSPs provide a single point of entry for accessing the full array of mental health services provided by the public system, including 24-hour emergency services. In FY 09, services were provided to some 234.000 individuals.

This administration directly operates 5 inpatient psychiatric hospitals and centers to supplement the current 59 primary inpatient hospital programs that are part of the CMHSP service network.

The Bureau of Substance Abuse and Addiction Services (BSAAS) administers the state's public substance use disorder network of prevention, treatment, and recovery services. BSAAS provides funds to 16 regional coordinating agencies, which in turn contract with 400 local agencies. Annually, there are 70,000 treatment admissions statewide, and 600,000 people received a primary prevention service. Major sources of revenue include the federal Substance Abuse Prevention and Treatment Block Grant, Medicaid, and state General Funds. In addition, BSAAS administers the provision of education and prevention and treatment services, including a 24-hour help line, serving over 600 individuals with problem gambling issues.

**Operations Administration.** The Operations Administration is comprised of the Bureau of Budget and Audit, the Office of Accounting, and the Office of Medicaid, and Main Support and is responsible for the overall administration of the department's financial activities.

Office of Services to the Aging (OSA). OSA promotes and enhances the dignity and independence of older persons in Michigan. This office is state government's focal point for issues important to our state's 1.8 million older adults and their caregivers. It allocates and monitors state and federal funds for all Older Americans Act services, including nutrition, community services, a legal hot line, emergency prescriptions, heating assistance, senior education, and care management. The governor appoints the OSA director and members of the Commission on Services to the Aging.

**Developmental Disabilities Council (DD Council).** The DD Council is established by Executive Order 2006-12 and operates under the authority of the Developmental Disabilities and Assistance Bill of Rights Act of 2000 (DD Act). The fundamental goal of the DD Council is to ensure that people with developmental disabilities have the opportunities and support to achieve their full potential. The council consists of 21 Michigan residents appointed by the governor. It is funded with federal funds and a 25 percent match, mostly at the local level. The federal grant requires that a minimum of 70 percent of those funds be used for advocacy, capacity building, and systemic change activities on behalf of people with developmental disabilities and their families. The council funds pilot or demonstration project grants in communities around the state to promote systemic change.

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The program goals include enhancing self determination, independence, and community inclusion of people with developmental disabilities. The council provides funding and leadership to the statewide regional interagency consumer committees (RICCs), which are the local/community-based advocacy groups empowered to promote local advocacy, community capacity building, and systemic change. This local advocacy assists the council in carrying out its fundamental mandates of the DD Act.

**Office of Recipient Rights.** The Office of Recipient Rights provides direct rights protection and advocacy services to individuals admitted to state psychiatric hospitals and centers for developmental disabilities and assesses and monitors the quality and effectiveness of the rights protection systems in community mental health service programs and licensed private psychiatric hospitals/units.